

Revision: HCFA-PM-87-14 (BERG)
OCTOBER 1987

OMB No.: 0938-0193

State/Territory: ARKANSAS

Citation

42 CFR 1002.203

AT-79-54

48 FR 3742

51 FR 34772

4.30 Exclusion of Providers and Suspension of
Practitioners and Other Individuals

(a) All requirements of 42 CFR Part 1002, Subpart B are met.

☒ The agency, under the authority of State law, imposes broader sanctions.

STATE <u>AR</u>	A
DATE REC'D <u>2-2-88</u>	
DATE APPV'D <u>2-18-88</u>	
DATE EFF <u>9-30-86</u>	
HCFA 179 <u>88-3</u>	

TN No. 88-3

Supersedes

TN No. 87-12

Approval Date 2-18-88

Effective Date 9-30-86

HCFA ID: 1010P/0012P

Revision: HCFA-AT-87-14 (BERC)
OCTOBER 1987

OMB No.: 0938-0193
4.30 Continued

ARKANSAS

State/Territory: _____

Citation

(b) The Medicaid agency meets the requirements of--

1902(p) of the Act
P.L. 100-93
(secs. 7)

(1) Section 1902(p) of the Act by excluding from participation--

(A) At the State's discretion, any individual or entity for any reason for which the Secretary could exclude the individual or entity from participation in a program under title XVIII in accordance with sections 1128, 1128A, or 1866(b)(2).

(B) Any HMO (as defined in section 1903(m) of the Act) or an entity furnishing services under a waiver approved under section 1915(b)(1) of the Act, that--

(i) Could be excluded under section 1128(b)(8) relating to owners and managing employees who have been convicted of certain crimes or received other sanctions, or

(ii) Has, directly or indirectly, a substantial contractual relationship (as defined by the Secretary) with an individual or entity that is described in section 1128(b)(8)(B) of the Act.

STATE	AR	A
DATE REC'D	2-2-88	
DATE APPV'D	2-18-88	
DATE EFF	8-18-87	
HCFA 179	88-3	

EN No. 88-3
Supersedes
TN No. new

Approval Date 2-18-88

Effective Date 8-18-87

HCFA ID: 1010P/0012P

Revision: HCFA-AT-87-14 (BERC)
OCTOBER 1987

OMB No.: 0938-0193
4.30 Continued

State/Territory: ARKANSAS

Citation

1902(a)(39) of the Act
P.L. 100-93
(sec. 8(f))

(2) Section 1902(a)(39) of the Act by--

- (A) Excluding an individual or entity from participation for the period specified by the Secretary, when required by the Secretary to do so in accordance with sections 1128 or 1128A of the Act; and
- (B) Providing that no payment will be made with respect to any item or service furnished by an individual or entity during this period.

(c) The Medicaid agency meets the requirements of--

1902(a)(41)
of the Act
P.L. 96-272,
(sec. 308(c))

(1) Section 1902(a)(41) of the Act with respect to prompt notification to HCFA whenever a provider is terminated, suspended, sanctioned, or otherwise excluded from participating under this State plan; and

1902(a)(49) of the Act
P.L. 100-93
(sec. 5(a)(4))

(2) Section 1902(a)(49) of the Act with respect to providing information and access to information regarding sanctions taken against health care practitioners and providers by State licensing authorities in accordance with section 1921 of the Act.

STATE	<u>AR</u>	A
DATE RECD	<u>2-2-88</u>	
DATE APPVD	<u>2-18-88</u>	
DATE EFF	<u>10-1-87</u>	
HCFA 179	<u>88-3</u>	

No. 88-3
Supersedes
TN No. new

Approval Date 2-18-88

Effective Date 10-1-87

HCFA ID: 1010P/0012P